

STATE OF MISSISSIPPI

COUNTY OF LAFAYETTE

DURABLE POWER OF ATTORNEY

I, JUDITH DORA LOYA, being above the age of twenty-one (21) years and under no legal disabilities, do hereby make, name, constitute, and appoint JOSE De JESUS ANDRADE my lawful attorney-in-fact for the following purposes:

- (1) To receive and receipt for all debts or evidences of indebtedness which may be due me.
- (2) To endorse my name to and on any and all checks, drafts, or evidences of payment due me in which I may be the payee.
- (3) To recover by suit or any other legal means any personal property, or the value thereof, which has been lost, stolen or misplaced by me or by others for me.
- (4) To receive, endorse my name on, give receipts and full acquittance for any and all pension checks, payments, or vouchers, including receipts from any and all trust funds, from whatever source or sources.
- (5) To write, sign my name to, or to withdraw funds or cash or checks or withdrawal slips from any and all banks in which I now have or may hereinafter have funds.
- (6) To pay taxes on any property belonging to me out of any funds which I may have at any bank or bank-like institution.
- (7) To make rental contracts with third parties for any length of time which in his discretion may dictate on any real property which I may own or hereafter own, and to receive the rents therefrom and give full acquittance therefor.
- (8) To buy real property in my name as grantee and to pay for same or contract to pay for same in my name out of funds now belonging to me, or to be hereinafter acquired by me.
- (9) To sell, exchange, or purchase any personal property which in his discretion may dictate, and

to pay for the same out of any funds which I may now or hereinafter have.

(10) To buy or sell corporate stocks, corporate bonds, municipal bonds, and/or United States Government bonds in my name as owner and to pay for same or contract to pay for same in my name out of funds belonging to me or out of funds to be hereinafter acquired by me.

(11) To sell, mortgage, or otherwise encumber or transfer any real property which I may own in whole or in part or may hereinafter own in whole or in part, and to receive the money therefor and to give full acquittance therefor.

(12) To sell, pledge, or otherwise encumber my personal property, including corporate stocks, corporate bonds, municipal bonds, or government bonds of which I may now or hereinafter own, and to receive money therefor and to give full acquittance therefor.

(13) To do any and all things with reference to my real and personal estate, which in his discretion may be deemed necessary and advisable.

(14) To receive and endorse my name to any and all Veterans Administration, Social Security, State Retirement, Pension fund, or other retirement checks and vouchers, as well as dividend checks, and to give full acquittance therefor.

(15) To make payment for or contract for debts, life insurance premiums, medical expenses, ordinary expenses which in his discretion may be deemed advisable.

(16) To initiate, file, conduct, and manage any and all claims, demands, rights of action, including lawsuits, which in his discretion may be deemed advisable.

(17) To make any and all health care decisions for me during any period of disability or illness including but not limited to directives to medical personnel not to resuscitate me, to stop feeding me, or to otherwise prolong my life by heroic measures if there is no reasonable chance of my survival and/or recovery to a meaningful quality of life and health.

Any acts and/or deeds in the performance of any and all of the above enumerated purposes shall be binding on me and as effectual as if I were present and acting in my own proper person. The acts of my said

attorney-in-fact shall bind my heirs, Executors, and Administrators.

The execution of the within Durable Power of Attorney, on the date hereinafter mentioned, shall amount to a revocation and cancellation of all Powers of Attorney heretofore executed by me.

This Durable Power of Attorney is specifically intended to survive my physical or mental incapacity or disability and shall be binding and effective until my death or its revocation.

WITNESS MY SIGNATURE on this the 30 day of October, 2008.


JUDITH DORA LOYA

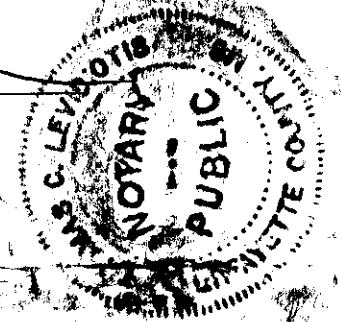
STATE OF MISSISSIPPI

COUNTY OF LAFAYETTE

This day personally appeared before me, the undersigned authority in and for the jurisdiction aforesaid, the within named JUDITH DORA LOYA, who, acknowledged that she signed and delivered, in duplicate originals, the above and foregoing Power of Attorney on the day and year therein mentioned.

Given under my hand and official seal on this the 30 day of October, 2008.


NOTARY PUBLIC



My Commission Expires:

Notary Public State of Mississippi At Large
My Commission Expires: December 10, 2009
Bonded Thru Heiden, Brooks & Garland, Inc.

Prepared BY:

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